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REYNOLDS, MOTL &
SHERWOOD

Form No. 602 R 4/21/2009

NOTICE OF COMPLETION OF GROUNDWATER DEVELOPMENT

Use this form for completed groundwater developments where the water has been put to use for the purposes identified with a maximum use of 35 GPM not to exceed 10 AC-FT per year.

Incomplete forms will be returned.

Filing Fee \$125.00

FOR DEPARTMENT USE ONLY

Notice No. 30047888 Basin 42B
Priority Date 12-1-09 Time 10:32 AM
Rec'd By SH
Fee Rec'd \$ 125 Check No. 324097234
Deposit Receipt # BIW101081
Payor (if different from name(s) listed in item 1 below) Fidelity Exploration & Prod. Co.
Refund \$ _____ Date _____
Deficiency Letter Sent _____

- ⇒ Your priority is determined by the date of filing. If it is determined this form was improperly filed, your priority date may be changed.
⇒ If your development is within a Controlled Ground Water Area, the regional office will contact you to explain the correct filing requirements.

- NAME** Alfred and Deanna Visborg
MAILING ADDRESS 208 Crescent Dr
CITY Sheridan **STATE** WY **ZIP** 82801
WORK PHONE _____ **HOME PHONE** 307-674-9591 **CELL PHONE** _____
- DIVERSION USED TO OBTAIN GROUNDWATER**
☒ Well – Attach well log, if available Water Well Contractor Name: _____
☐ Developed Spring (Excavation performed at the spring location.)
☐ Pit/Pond – Surface Area _____ Acres _____ Depth _____
- FLOW RATE USED** 6.6 GPM
- COMBINATION OR SHARED DEVELOPMENT**
a. Will this development be used in combination with another well or spring? ☐ Yes ☒ No
b. Will this development be shared by other users? ☐ Yes ☒ No
If yes for either question, list the water right numbers and explain how the development is used. _____
- PURPOSE AND PERIOD OF USE**

Domestic	Number of homes supplied <u>NA</u> Year round use? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, from _____ to _____, inclusive of each year.
Lawn & Garden	Total Size of lawn and/or garden - length x width <u>NA</u> April 1 – October 31 <input type="checkbox"/> Yes <input type="checkbox"/> No If no, from _____ to _____, inclusive of each year.
Irrigation	Type of crop <u>NA</u> Total Crop Acres Irrigated _____ April 1 – October 31 <input type="checkbox"/> Yes <input type="checkbox"/> No If no, from _____ to _____, inclusive of each year.
Stock (Example: 100 Cows & 1 Horse)	Number and type <u>12 Cows x 30 days (.02 AF @ 20 gal/day/cow)</u> Year round use? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, from _____ to _____, inclusive of each year.
Other	Describe the purpose of the use <u>NA</u> Amount of water used _____ gallons per day Number of days used _____ Year round use? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, from _____ to _____, inclusive of each year.
- POINT OF DIVERSION** – Location of Ground water Development
SW 1/4 SE 1/4 SE 1/4 Section 27 Twp 9 N/S Rge 40 E/W County Big Horn
Lot _____ Block _____ Tract No. _____ Subdivision Name _____
Government Lot No. _____ COS No. _____
Street or Road Address, including City, State & Zip Code of the Development Well- Visborg 44C-2790
- PLACE OF USE** - Enter the 17 digit geocode applicable to the place of use legal land description. 22020927404010000 If there are multiple places of use, attach additional sheets and list the geocode for each legal land description. The geocodes can be found in county records.
Is the place where water is used the same as the point of diversion? ☒ Yes ☐ No
If no, enter the place of use land description below. Attach additional sheets if necessary.
☐ Domestic ☒ Stock ☐ Irrigation ☐ Other
SW 1/4 SE 1/4 SE 1/4 Section 27 Twp 9 N/S Rge 40 E/W County Big Horn
Lot _____ Block _____ Tract No. _____ Subdivision Name _____
Government Lot No. _____ COS No. _____
Street or Road Address, including City, State & Zip Code of the Place of Use Lat 45.009676 Long -106.810626
- AFFIDAVIT OF OWNERSHIP OR WRITTEN CONSENT**
I have possessory interest in the property where the water has been put to beneficial use and I have the exclusive property rights in the ground water development works **OR** I have attached written consent of the person owning the ground water development works and/or written notification to the land owner pursuant to MCA 85-2-306(1).

The statements appearing here are to the best of my knowledge true and correct.
Appropriator's Signature Deanna Visborg Date: 11-19-09
Al F Visborg Date: 11-19-09

Go to web site <http://www.dnrc.mt.gov/wrd/> to learn additional information about the use of this form.



Tank ID #67

WATER POLICY INTERIM
COMMITTEE
MARCH 10, 2010
EXHIBIT 19

MONTANA WELL LOG REPORT

Well ID# Visborg 44C-2790

This log reports the activities of a licensed Montana well driller and serves as the official record of work done within the borehole and casing and describes the amount of water encountered. **This form is to be completed by the driller and filed with Mt. Bureau of Mines & Geology within 60 days of completion of the work.** Acquiring Water Rights is the well owner's responsibility and is not accomplished by the filing of this report.

Well log information is stored in the Groundwater Information Center at the Montana Bureau of Mines and Geology (Butte) and water right information is stored in the Water Rights Bureau records (Helena).

For fields that are not applicable, enter NA. Optional Fields have a grayed background. Record additional information in the REMARKS section.

1. WELL OWNER:

Name Fidelity Exploration & Production Company
Mailing Address 1700 Lincoln, Suite 2700, Denver, CO 80203

2. WELL LOCATION: List ¼ from smallest to largest

SE ¼ SE ¼ ¼ ¼, Section 27
Township 09S N/S Range 40E E/W County BIGHORN
Lot _____ Tract/Bk _____ Subdivision Name _____
Well Address _____
GPS ☐ Yes ☐ No
Latitude 45.0098247 Longitude -106.81030826
Error as reported by GPS Locator (± feet) _____
Horizontal datum ☒ NAD27 ☐ WGS84

3. PROPOSED USE:

☐ Domestic ☐ Stock ☐ Irrigation
☐ Public Water Supply ☐ Monitoring Well ☒ Other: CBNG

4. TYPE OF WORK:

Method: ☒ New Well ☐ Deepen Existing Well ☐ Abandon existing well
☐ Cable ☒ Rotary ☐ Other: _____

5. WELL CONSTRUCTION DETAILS:

Borehole:

Dia. 14.75 in. from 0 ft. to 60 ft.
Dia. 9.875 in. from 60 ft. to 864 ft.
Dia. _____ in. from _____ ft. to _____ ft.

Casing:

0.25

Steel: Wall Thickness

☒ Threaded ☐ Welded
Dia. 10.75 in. from 0 ft. to 60 ft.
Dia. 7 in. from 0 ft. to 842 ft.

Plastic: Pressure Rating _____ lbs.

☐ Threaded ☐ Welded
Dia. _____ in. from _____ ft. to _____ ft.
Dia. _____ in. from _____ ft. to _____ ft.

Perforations/Slotted Pipe:

Type of perforator used

Under-ream

Size of perforations/slots

_____ in. by _____ in.
_____ no. of perforations/slots from 844 ft. to 863 ft.
_____ no. of perforations/slots from _____ ft. to _____ ft.

Screens

☐ Yes ☒ No

Material

Dia. _____ Slot size _____ From _____ ft. to _____ ft.
Dia. _____ Slot size _____ From _____ ft. to _____ ft.

Gravel Packed:

☐ Yes ☒ No

Size of Gravel

Gravel placed from _____ ft. to _____ ft.

Packer:

☐ Yes ☒ No

Type

Depth(s) _____

Grout: Material Used

Depth from _____ ft. to _____ ft. OR ☒ Continuous feed6. WELL TEST DATA: **No well tests conducted**

A well test is required for all wells. (See details on well log report cover.)

☐ Static water level _____ ft. below top of casing or☐ closed-in artesian pressure _____ psi.

How was test flow measured:

bucket/stopwatch, weir, flume, flowmeter, etc.

Yellowstone Controlled Groundwater Area - Water Temperature _____ °F

☐ AQUIFER TEST DATA FORM ATTACHED

Test - 1 hour minimum

Drawdown is the amount water level is lowered below static level.

All depth measurements shall be from the top of the well casing.

Time of recovery is hours/minutes since pumping stopped.

Air test*

_____ gpm with drill stem set at _____ ft. for _____ hours
Time of recovery _____ hrs/min. Recovery water level _____ ft.

OR Bailer test*

_____ gpm with _____ ft. of drawdown after _____ hours
Time of recovery _____ hrs/min. Recovery water level _____ ft.

OR Pump test*

Depth pump set for test _____ ft.
_____ gpm pump rate with _____ ft. of drawdown after _____ hrs pumping
Time of recovery _____ hrs/min. Recovery water level _____ ft.

OR Flowing Artesian*

_____ gpm for _____ hours

Flow controlled by _____

* During the well test the discharge rate shall be as uniform as possible. This rate may or may not be the sustainable yield of the well. Sustainable yield does not include the reservoir of the well casing.

7. WELL LOG:

Depth, Feet		Material
From	To	color/rock and type/descriptor (example: blue/shale/hard, or brown/gravel/water, or brown/sand/heaving)
0	160	sandstone/shale
160	167	Lower Roland 2 blackcoal
167	240	sandstone/shale
240	243	Smith blackcoal
243	256	sandstone/shale
256	270	Lower Smith blackcoal
270	456	sandstone/shale
456	480	Dietz 1 blackcoal
480	490	sandstone/shale
490	505	Dietz 2 blackcoal
505	568	sandstone/shale
568	571	Dietz 3A blackcoal
571	572	sandstone/shale
572	588	Dietz 3B blackcoal
588	673	sandstone/shale
673	695	Monarch 1 blackcoal
695	839	sandstone/shale
839	864	Carney 1 blackcoal
	864	TD

☐ ADDITIONAL SHEETS ATTACHED

8. DATE WELL COMPLETED:

October 17, 20039. REMARKS: API # 25-003-21726

10. DRILLER/CONTRACTOR'S CERTIFICATION:

All work performed and reported in this well log is in compliance with the Montana well construction standards. This report is true to the best of my knowledge.

Name, firm, or corporation (Print) N/A Not installed by licensed water well driller.

Address _____

Signature _____

Date _____

License no. _____



Montana Bureau of Mines & Geology
The University of Montana
1300 West Park Street
Butte, MT 59701

MBMG ID# _____